RFP 0613-235 - Amendment #1

Questions and Answers

MENTAL HEALTH SERVICES – FAMILY INTEGRATED TRANSITIONS

- 1. General: The current pilot programs are located in JRA Region 5, which are more urbanized than JRA Region 6. It is possible, if not likely, that the proportion of travel time to hours available for direct service delivery will be higher for an applicant proposing to serve Region 6, and that travel expenses will be a higher proportion of the cost of providing services.
 - a. Does data provided by the current pilot programs provide a guideline for the ratio of cost of services to program expenses? or
 - b. Has DSHS determined a baseline or target ratio?

Answer: There are actually two current providers for FIT Services contracted with JRA. One is in JRA Region 5 which includes Pierce and Kitsap counties, the other is in JRA Regions 3 and 4 which include Snohomish and King counties. Although King and Pierce Counties have a higher population in an urban setting, JRA youth are located throughout the counties. We are not sure that there would necessarily be a higher proportion of travel time comparatively. There is also considerable travel made to the JRA facilities, 3 of which are located in Region 6, Maple Lane School in Rochester, Green Hill School in Centralia, and Naselle Youth Camp in Naselle. This would be less travel time for a provider in Region 6 then in Snohomish County. There has been no data collected or baseline or target ratio determined. According to the current providers the therapists should meet with the family at a minimum of 1.5 to 2 hours weekly plus collateral contacts. The time and cost of travel is factored in to the overall cost of the contract, and is often considered when planning visits. For example often time one visit to an institution can be used to visit several different youth at the same time.

2. RFP Document/Section

a. 4.b (1) Staffing requirements

Text refers to chart in section 4.6. Should the reference be to the chart on page 5 in Section c.2?

Answer: That is correct. The chart is in Section 5.

b. 4.b. (2) Clinical Supervisor

Section 4.b.1 indicates that FIT therapists with a full-time caseload may not engage in other paid clinical services. May an applicant plan to create a 1.0 FTE clinical supervisor staff position, with .5 obligated to FIT?

This is the practice with the current FIT providers.

c. 4.e. Rates

(1) Does the staffing model of .5 FTE allocation for a clinical supervisor per 2-3 therapists assume that the clinical supervisor is also the administrative supervisor?

Answer: The current clinical supervisors for the current FIT providers also serve in an administrative capacity.

(2) The level of expected funding assumes a team of 2.5 or 3.5 FTE's. Would the estimated funding for a team of 1.5 therapists and a .5 clinical supervisor be proportionate? Example:

	Proposed level	from RFP p. 5	
Amount per month	\$12,847.20	\$16,059.00	\$ 21,412.00
Total for 6 months	\$77,083.20	\$96,354.00	\$ 128,472.00
FTE as a percent of monthly cost	0.016%	0.016%	0.02%

It would make sense that if team was proposed to serve Thurston and Lewis, or Thurston and Mason counties that the funding for the team of 1.5 therapists and a .5 clinical supervisor would be proportionate.

3. Exhibit C Questionnaire and Qualifications

IV. Collaboration

May an applicant contact employees of JRA for the purpose of planning collaboration?

It is expected and hoped that the FIT therapist and JRA residential and parole counselor will work together with the families they are serving. Both entities should be in communication and share information with each other. Both sides should initiate communication as appropriate.

V.E Culturally appropriate and bilingual services

Is the capacity to provide translation services in the seven languages required in an applicant's service area responsive to these criteria?

If there is the capacity to provide translation services in seven languages, then that should certainly be responsive to the criteria. Many times JRA staff and the FIT therapist may be able to work together to share translation services. At other times this service is provided for by the FIT therapist's organization.

VI.C. Start up activities

(1) What is the anticipated length of the initial visit?

An initial visit to a family's home varies in its duration depending on circumstances. However, 1 to 2 hours is average.

(2) What are the anticipated hours of the training days?

The initial training is anticipated to be 5 days with a schedule of 9 a.m. to 4 p.m.

(3) Should the applicant assume furthest distance from the agency office to the training site in calculating travel time and expense as part of anticipated start-up costs?

That would seem reasonable. However, at this time the training site has not been determined. We think the location of the successful bidder may have an influence on where the initial 5 day training will be held.

VI. References

Is the applicant permitted to contact employees of DSHS and/or JRA to obtain permission to provide their names as references?

The applicant may contact DSHS/JRA employees to obtain permission to provide their names as references. However, the RFP Coordinator may require JRA employees directly involved in the process for this procurement (program manager, evaluation team, etc.) to decline to be used as a reference.

4. Time line

The announcement of the apparently successful bidder is Nov. 1. The contract will start Jan. 1, with the first training probably Jan. 8-12. Considering the impact of the holidays during Nov. & Dec. we are concerned this may be a tight time line. Has consideration been given to this tight turn around given the time of year?

It is understood that November and December are busy times of the year and that this is a tight timeline. It is hoped that, given 2 months time, the successful bidder will be able to organize and hire appropriate personnel to begin the contract in January.